

Britain Yearly Meeting Children and Young People's Work



Event & Activity Management Policy Procedures & Guidance 15

This policy applies to all Britain Yearly Meeting centrally managed work with children and young people (see <http://www.quaker.org.uk/event-and-activity-management>)

Drugs and prohibited substances guidance

Introduction

These guidelines provide:

- A framework to enable staff and volunteers to maintaining a duty of care for young people and safeguard the health and safety of participants
- Guidance for managing drug-related incidents during events
- An outline of what information may be passed to parents in the event of such an incident
- It **does not** seek to provide guidance on drugs education work

Prohibited Substances

In the context of this policy prohibited substances refers to any substance the possession or use of which is prohibited by the event boundaries. These boundaries will be event specific according to age and may include tobacco, alcohol and illegal drugs. These guidelines also cover prescription only medication that is used or in the possession of someone if no prescription is held.

Tobacco

- Event boundaries vary dependent on the age of participants. For some smoking is not allowed. Most participants are under the legal age for buying tobacco (18).

Alcohol

- All event boundaries state that possession or use of alcohol is not allowed and most participants at events are under the legal age for buying alcohol (18).

Illegal drugs

- All event boundaries state that possession or use of illegal drugs is not allowed.

Prescription Medicines

- Information about medicines or drug taking should be included on the participant's information and consent form and in some cases staff may be asked to store medicines in a secure place. If young people arrive with any prescription drugs that are not detailed on the information and consent form/health update the staff member with responsibility for participant pastoral care should take steps to confirm that the young person should be taking this medicine (including contacting parents or the young person's doctor). Possession of some prescription-only medicines, such as Temazepam and Ritalin, is illegal under the Misuse of Drugs Act (1971) if no prescription is held.

Drug/Alcohol related incidents: Safeguarding

The first priority in managing incidents is to ensure the safety of participants.

If, as a result of drug/alcohol use a participant is at immediate risk of harm (e.g. overdose, excessive alcohol consumption), or if there is a possibility they could be, then medical

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assistance should be called immediately. If possible, the cause of any immediate risk of harm should be removed.

The following procedures should be carried out before help arrives:

- If the person is conscious:
 - Stop them from taking more drugs/drinking more alcohol
 - Ascertain what substances the person has taken.
 - Collect any substance and any vomit for medical analysis
 - Do **not** induce vomiting
 - Keep the person under observation, and calm and quiet
 - When medical help arrives, pass on information, drug samples and vomit.

- If the person is unconscious
 - Place them in the recovery position and ensure they can breathe
 - Call an ambulance
 - Do not move the person if they have fallen
 - Do not give anything by mouth
 - Collect any substance and any vomit for medical analysis
 - Do not induce vomiting
 - Do not attempt to make the person sit or stand
 - Do not leave the person alone or with another young person
 - When emergency staff arrive pass on information, drug samples and vomit.

- If alcohol use is suspected be aware that alcohol in the stomach continues to be absorbed into the bloodstream after excessive drinking, and can reach lethal levels even after drinking has stopped.
 - Stop them from drinking more alcohol
 - Make sure they keep warm. Alcohol lowers body temperature and there is a risk of hypothermia - especially if they're outside
 - Never leave a drunk person on their own as they could injure themselves, fall unconscious or be sick and suffocate on their vomit.
 - Stay with them until they sober up, monitoring their condition.

- If the person becomes unconscious:
 - Call an ambulance
 - Ensure their airway is clear, place in the recovery position. This will stop them choking if they're sick
 - Make sure they keep warm and remain with them until help arrives
 - Tell the emergency staff that they have been drinking, as well as about any drugs you think they may have taken

- If a person is under the influence of drugs/alcohol but they are not at immediate risk of harm:
 - Ask them what they have taken
 - Separate them from the group
 - Stay with them until they sober up, monitoring their condition
 - Monitor the young person for signs of harm while they sleep

Pastoral Support

- In all cases staff should consider what pastoral care and support is needed by participants within the situation, in addition to any medical attention.
- Staff should consider if it is appropriate to give participants information about sources of support in relation to drug/alcohol/tobacco use.

Guidelines on Action

Drug-related incidents (including alcohol and tobacco where this is against event boundaries) may take two forms: drugs found on premises and actual or suspected drug use. The following action should be taken by staff and volunteers.

Action by volunteers

- Possession of prohibited substances
 - Any alcohol/drugs/tobacco must be confiscated and passed to staff for secure storage.
 - Ask participants if they have more drugs/alcohol, if so, confiscate and pass to staff.
 - Report to staff
 - Complete an incident/accident reporting form.
- Actual or suspected drug use¹
 - Ensure that drug/alcohol use has stopped and that participants are safe, including seeking medical assistance if necessary (see above).
 - Ask participants if they have more drugs/alcohol, if so, confiscate and pass to staff.
 - Report to staff immediately.
 - Complete an incident/accident reporting form.

Action by staff

These actions are in addition to any listed above (under action by volunteers) that might be undertaken by staff. Action should not be taken by one staff member alone and the issue should be discussed by staff present at an event. If only one staff member is present at an event they should, wherever possible, discuss the issue with another staff member.

- Ascertain legal status of drug if possible. Staff should not attempt to analyse or taste unknown substances. Police can advise on analysis and formal identification, although this is normally carried out only if it will be required as evidence within a prosecution.

Legal Drugs (tobacco, alcohol, non-prescribed prescription only medication)

- Ask participants if they have more tobacco/alcohol, if so, confiscate.
- Staff should consider whether to destroy or dispose of any alcohol or tobacco - if so they should ensure that a second adult witness is present throughout.
- If staff decide not to dispose of alcohol/tobacco then it should be stored securely for the duration of the event and staff should be clear on the action to be taken.
- Prescription-only medication not prescribed to the individual who has them should be confiscated and not be returned without discussion with parents and/or the participant's doctor.

Illegal Drugs

If the incident relates to cannabis or heroin staff have a legal responsibility to stop the situation.² In all cases staff should act with a duty of care including evaluating the risk and vulnerability factors relating to the individual and the group including medical problems.

¹ Actual use is where a participant is discovered in the act of using drugs/alcohol, suspected use is where use can reasonably be assumed for example a participant being intoxicated. The standard of proof for action by staff/volunteers is discretionary. The judgement of staff and volunteer team members about intoxication may overrule the denial of an evidently intoxicated person. Evidence supporting such a judgement should be recorded on the incident/accident reporting form.

² Misuse of Drugs Act (1971) Section 8

- If illegal substances are found then these must be recovered and confiscated. No illegal drugs confiscated by staff should be returned as this would constitute an offence of possession with intent to supply.
- Staff are permitted to take possession of illegal drugs (or suspected illegal drugs) for the purposes of preventing an offence from being committed or continued.
- All illegal substances or suspected illegal substances should be confiscated by staff who should:
 - ensure that a second adult witness is present throughout
 - seal the sample in a plastic bag and include details of the date and time of the seizure/find and witness present
 - store it in a secure location or lockable container with access limited to staff
 - notify the police, who will collect it and then store or dispose of it
 - record full details of the incident on an accident/incident reporting form, including the police incident reference number
- Participants should be asked if they have more drugs/alcohol, if so they should be confiscated.
- If staff believe that illegal substances remain on the premises they may consult the police for advice
- Staff may contact the police to discuss a case and ask for advice.
- Staff are not required by law to divulge the name of young people from whom the drugs were taken to police.
- In deciding whether or not to inform the police staff should consider:
 - Nature of offence (see below for offences under the Misuse of Drugs Act 1971)
 - Class of drug (see below for classes of commonly available drugs)
 - Consequences of not informing the police and whether this would be counter-productive for the event, the organisation and wider Quaker community.
- Where the police are informed they will be required to follow their own set internal procedures.
- If police action is to be taken against a young person, the police should make arrangements for them to attend a local police station accompanied by an appropriate adult for interview. Where possible arrest or police interview should not take place at an event. An appropriate adult should always be present during interviews, preferably a parent/carer or duty social worker.
- In line with guidance on informed consent (cross-ref) staff should consider informing parents/carers unless to do so would jeopardise the safety of the young person. Factors to consider when deciding whether to inform parents are:
 - Implications of not informing parents
 - Whether a young person has been found in possession of alcohol/drugs or whether actual alcohol/drug use is discovered.
 - Nature of offence (see below for offences under the Misuse of Drugs Act 1971)
 - Class of drug (see below for classes of commonly available drugs)
 - Medical requirements
 - The attitude, age and vulnerability of the young person
- Staff should consider what information should be provided to parents. This might or might not include
 - Action taken by volunteers/staff in relation to the incident
 - The nature of the offence
 - The substances involved
 - Medical requirements
 - The attitude of the young person
- Staff should consider if there is a need to inform the venue, especially if the police are involved. There may be insurance implications if an illegal act has taken place on their premises.

- Staff should consider if there is a need to inform the venue in case young people have left drugs paraphernalia. This may have implications for the future use of venues.
- Details of all action taken should be recorded on an incident/accident reporting form.

Sanctions

There are a range of possible sanctions for behaviour that breaks event boundaries, including use of tobacco, alcohol and illegal drugs. These sanctions may range from a restatement of boundaries to individuals or a group to the most serious sanction which is to be sent home. Any sanctions should be decided on by staff (together with peer facilitators and team members where staff deem this appropriate). In deciding sanctions it may be helpful to consider the following

- Whether a young person has been found in possession of alcohol/drugs or whether actual alcohol/drug use is discovered.
- Nature of offence (see below for offences under the Misuse of Drugs Act 1971)
- Class of drug (see below for classes of commonly available drugs)
- Motive
- Medical requirements
- Nature of the evidence
- The attitude, age and vulnerability of the young person
- Venue rules (for example where these stipulate that all alcohol/illegal drug use results in the individual leaving the premises).
- Even serious offences, social or criminal, should not necessarily attract the most serious sanctions, particularly for a first-time offence.
- Fairness and consistency are important and it would be difficult to justify giving unequal sanctions to a group breaking the same boundary in the same way.
- Any sanctions taken should be recorded on an incident/accident reporting form.

Additional Information

Misuse of Drugs Act 1971 (amended 2004 and 2008)

Offences under the Misuse of Drugs Act

- **Possession:** where a person knowingly has a controlled drug.
- **Possession with intent to supply:** where a person knowingly has a controlled drug and intends to supply to others whether for payment or not. This includes: packaging a drug in a way that indicates it is going to be supplied to others; where a person is 'looking after' drugs and returns or intends to return them to another person.
- **Supplying a controlled drug:** giving or selling drugs to someone else. The law does not differentiate between supplying/giving drugs to friends and supplying for profit.
- **Supplying drug paraphernalia:** this includes all equipment to enable the use of a controlled drug in any form with the exception of matches and a tourniquet.
- **Production, cultivation or manufacture of controlled drugs:** e.g. growing cannabis plants.
- An occupier or individual concerned in the management of any premises, that knowingly permits or suffers any of the following activities to take place on those premises:
 - producing or attempting to produce a controlled drug
 - supplying, attempting to supply or offering to supply a controlled drug
 - preparing opium for smoking;
 - smoking cannabis, cannabis resin or prepared opium

- It is not illegal for someone to be in possession of a controlled drug if it is found, given, or confiscated, and it is not for that person's own use but to prevent a crime being committed. They should hold it for as short a time as possible.

Classes of Drugs

	Class A	Class B	Class C
Principle drugs included*	Opium Heroin/methadone Cocaine/Crack cocaine LSD Ecstasy fungi containing the drugs Psilocin or Psilocybin (magic mushroom) Class B drugs prepared for injection	Amphetamines Barbiturates Codeine Ritalin Cannabis resin Cannabis herb	Anabolic steroids Benzodiazepines (minor tranquillisers e.g. temazepam) GHB (gamma-hydroxy butyrate) Some stimulant, anti-depressant and antiobesity medicines
Maximum penalty for possession	7 years and/or a fine	5 years and/or a fine	2 years and/or a fine
Maximum penalty for trafficking, supply or production	Life imprisonment	14 years and/or a fine	14 years and/or a fine
These are some commonly available drugs; it is not a complete list of controlled drugs.			

The Medicines Act 1968

This divides medicines into three categories:

- **Prescription-only medicines or restricted medicines** which can only be supplied from a registered pharmacy by or under the supervision of a pharmacist on receipt of a prescription from an appropriate practitioner. Possession of some prescription-only medicines, such as Temazepam and Ritalin, is illegal under the Misuse of Drugs Act if no prescription is held.
- **Pharmacy medicines**, which can be sold without a prescription but only by a pharmacist (also called over-the-counter medicines)
- **General sales medicines**, which can be sold without a prescription by any shop.

Source:

Drugs: Guidance for schools Department for Education and Skills February 2004 Ref: Dfes/0092/2004 (while this advice is directed at schools, it is also relevant for those of school age in other contexts).